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APPLICANTS

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*None Av*** CONTINUING DATA *None Av*** FOREIGN APPLICATIONS *None Av*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 10/25/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		
Verified and Acknowledged	<i>Am</i>		
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Initials			
STATE OR COUNTRY OR	SHEETS DRAWING 10	TOTAL CLAIMS 32	INDEPENDENT CLAIMS 3

ADDRESS

08791

TITLE

Method and apparatus to provide a personalized channel

FILING FEE RECEIVED 1056	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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